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CONFIRMATION NO. 3701

SERIAL NUMBER 10/776,442	FILING DATE 02/10/2004 RULE	CLASS 424	GROUP ART UNIT 1649	ATTORNEY DOCKET NO. 2609/60726- AZ/JPW/GJG/DJK					
<p>APPLICANTS</p> <p>Moses Rodriguez, Rochester, MN;</p> <p>Daren Ure, Rochester, MN;</p> <p>** CONTINUING DATA *****</p> <p>This application is a DIV of 09/885,227 06/20/2001 PAT 6,800,285 which claims benefit of 60/287,171 04/27/2001 and claims benefit of 60/269,788 02/16/2001 and claims benefit of 60/212,577 06/20/2000 <i>Cyw 1/20/06</i></p> <p>** FOREIGN APPLICATIONS *****</p> <p><i>None Cyw 1/20/06</i></p> <p>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</p> <p>** 05/07/2004</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Changf Cyw</i> Examiner's Signature Initials </td> <td style="width:10%;"> STATE OR COUNTRY MN </td> <td style="width:10%;"> SHEETS DRAWING 32 </td> <td style="width:10%;"> TOTAL CLAIMS 26 </td> <td style="width:10%;"> INDEPENDENT CLAIMS 4 </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Changf Cyw</i> Examiner's Signature Initials	STATE OR COUNTRY MN	SHEETS DRAWING 32	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 4
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<p>ADDRESS</p> <p>John P. White Cooper & Dunham LLP 1185 Avenue of the Americas New York , NY 10036</p>									
<p>TITLE</p> <p>Treatment of central nervous system diseases by antibodies against glatiramer acetate</p>									
FILING FEE	FEES: Authority has been given in Paper <table border="1" style="float: right; width: 200px;"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of</td> </tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of		
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